

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 1 OF 3
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER ▼ C C00075820	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee FP1 STRATEGIES LLC		Date MM / DD / YYYY 08 / 20 / 2013	
Mailing Address PO BOX 16504		Amount 16500.00	
City ALEXANDRIA	State VA	Zip Code 22302	Transaction ID : SE24-0.036488
Purpose of Expenditure MEDIA	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: MN District: 07
Name of Federal Candidate Supported or Opposed by Expenditure: COLLIN C PETERSON		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 58491.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC		Date MM / DD / YYYY 08 / 20 / 2013	
Mailing Address 815 SLATERS LANE		Amount 20491.44	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24-0.036486
Purpose of Expenditure MEDIA	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: MN District: 07
Name of Federal Candidate Supported or Opposed by Expenditure: COLLIN C PETERSON		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 58491.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	36991.44
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A. Davis

Signature

[Electronically Filed]

Date

MM / DD / YYYY
08 / 22 / 2013

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 2 OF 3
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE		FEC IDENTIFICATION NUMBER ▼ C C00075820	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee FP1 STRATEGIES LLC		Date MM / DD / YYYY 08 / 21 / 2013	
Mailing Address PO BOX 16504		Amount 2500.00	
City ALEXANDRIA	State VA	Zip Code 22302	Transaction ID : SE24-0.036489
Purpose of Expenditure MEDIA	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: MN District: 07
Name of Federal Candidate Supported or Opposed by Expenditure: COLLIN C PETERSON		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 58491.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee FP1 STRATEGIES LLC		Date MM / DD / YYYY 08 / 22 / 2013	
Mailing Address PO BOX 16504		Amount 2500.00	
City ALEXANDRIA	State VA	Zip Code 22302	Transaction ID : SE24-0.036514
Purpose of Expenditure MEDIA	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: MN District: 07
Name of Federal Candidate Supported or Opposed by Expenditure: COLLIN C PETERSON		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 58491.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	5000.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Keith A. Davis

Signature

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Date

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Full Name (Last, First, Middle Initial) of Payee FP1 STRATEGIES LLC		Date 08 / 22 / 2013	
Mailing Address PO BOX 16504		Amount 16500.00	
City ALEXANDRIA	State VA	Zip Code 22302	Transaction ID : SE24-0.036515
Purpose of Expenditure MEDIA	Category/Type 	Office Sought: <input checked="" type="checkbox"/> House State: MN <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: COLLIN C PETERSON		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 58491.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Full Name (Last, First, Middle Initial) of Payee		Date / / 	
Mailing Address		Amount 	
City	State	Zip Code	
Purpose of Expenditure	Category/Type 	Office Sought: <input type="checkbox"/> House State: <input type="checkbox"/> Senate District: <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶		16500.00	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶		 	
(c) TOTAL Independent Expenditures..... ▶		58491.44	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature <u>Keith A. Davis</u>		Date 08 / 22 / 2013	
[Electronically Filed]			